



Division of Prevention and Behavioral Health Services
Department of Services for Children Youth and Their Families
State of Delaware

PI 003 Provider Monitoring and Evaluation Policy			
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Approved by:	Susan Cycyk, M. ED.	Title: Division Director	
Signature:		Date Adopted: 09/16/ 97	
	<i>Susan K Cycyk 4/4/12</i>	Revisions: 05/15/03, 12/7/06, 5/19/09 , 4/15/10, 8/1/2010, 11/15/10, 8/2/2011, 3/29/12	Reviewed:

I. Purpose

The purpose of the monitoring activity is to assure that quality services are provided to all children and families receiving direct services for mental health and substance abuse served by the Division of Prevention and Behavioral Health Services (DPBHS) and its contract providers in all service programs.

II. Policy

DPBHS service providers shall comply with standards established by DPBHS, DSCYF and relevant regulatory, licensing and accreditation bodies having jurisdiction over DPBHS services and its affiliated agencies, providers and service programs. To determine compliance and ongoing continuous improvement process in each provider, DPBHS will conduct reviews with the agencies at a frequency appropriate to the level of care.

The Division's Quality Improvement Unit and Clinical Service Management (CSM) will work in collaboration with other Departmental and Divisional staff to provide regular reports on activities to the Utilization Review and Quality Management Committees and to maintain documentation of all provider monitoring and quality improvement activities.

PI 003 Provider Monitoring Procedure			
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Provider Monitoring Procedure

The Quality Improvement Unit will coordinate with appropriate divisional and departmental staff to conduct reviews on all DPBHS Direct Service Providers of mental health and substance abuse to monitor and evaluate the quality of services being delivered to Department consumers, compliance with contractual guidelines, fiscal and billing practices, and to inform performance improvement plans as appropriate.

DPBHS will focus on monitoring domains not assessed by others (regulators, licensing, accreditation).

DPBHS will provide technical assistance to providers for their improvement processes when they are in alignment with Departmental priorities.

Onsite reviews will include scheduled and may include unscheduled reviews.

Procedure

- A. Prior to use of a new provider or a provider who has not had contact with the division for a year or more, DPBHS staff will review relevant data. For out of state residential treatment services, a member of QI or Provider Services along with a CSM team member will complete a site visit and complete the Pre Placement Site Review form.
- B. The monitoring team will review all mental health and substance abuse services that are more intensive than outpatient care as outpatient services are closely monitored by managed care organizations. The monitoring team will visit each in-state mental health or substance abuse provider with whom DPBHS contracts at a frequency appropriate to the level of care. The monitoring team will strive to schedule visits to out of state providers.
 - a. The monitoring team will complete a program monitoring.
 - i. In the event that concerns are identified, the provider may be asked to complete a Performance Improvement Plan or Corrective Action Plan and further monitoring or a focused review may occur.
 - b. The monitoring team will complete an audit of fiscal and billing practices. The audit will typically be based upon a random sampling of 10% of provider cases. The team will reconcile bills with appropriate documentation in client charts.

- i. In the event that concerns are identified, the provider may face financial penalties as indicated in the *Statement of Agreement* and *Article V. Section H Records and Audits of the contract*, and further monitoring may occur.
- C. Monitoring frequency will be based upon the program's tier.
 - a. Tier I. In-state psychiatric hospitals
 - b. Tier II. In-state Crisis bed, in-state Residential Treatment, Individualized Residential Treatment,
 - c. Tier III. Mental health and substance abuse Day treatment
 - d. Tier IV. Mental health and substance abuse Intensive outpatient treatment
 - e. Tier V. Outpatient with Aide
 - f. Tier VI. PBHS contracted out of state residential treatment
- D. Based upon the provider's performance during the monitoring and findings of the Billing Audit, the monitoring team may:
 - a. Provide basic recommendations and/or feedback.
 - b. Require Provider's to complete CAP or PIP:
 - i. The QI unit will be available to respond to any questions the Provider may have while developing their Corrective Action Plan. Once implemented, the Corrective Action Plan will be closely monitored by the QI unit for compliance.
 - ii. A copy of the Monitoring Report and the required Three-Month Corrective Action Plan will be submitted to the Quality Management Committee.
 - iii. A copy of the finalized Corrective Action Plan will be stored in FACTS.
 - iv. During periods of Corrective Action, DPBHS may limit or discontinue referrals to the provider. In addition, DPBHS may also review clients currently served by the provider and determine if a change in service provider is appropriate.
 - v. If the Contracted Provider fails to advance to "substantial" compliance within the three-month period established in their Corrective Action Plan, the situation will be reviewed by the Quality Management Committee and DPBHS will determine if the Corrective Action Plan can be extended or if further steps for action, up to and including termination of the contract, need to be taken. If termination of the contract is recommended, the Leadership Team will review the information and make the final decision.
 - vi. As necessary, DPBHS will collaborate with the Safety Council, Accreditation Body, Licensing Provider, Institutional Abuse and/or others with whom it is deemed appropriate.
- E. The Program Administrator will schedule to meet with each active provider with whom DPBHS contracts for a qualitative discussion of program and/or system issues and needs. Prior to this review, data and information will be collected and analyzed as deemed appropriate to the level of care provided by the contracted agency, and efforts around data collection will be coordinated with the DPBHS data unit and if applicable the DPBHS QI Unit.

- F. The IRT Provider(s)' procedure for monitoring IRT homes will be reviewed by appropriate staff. If found to be sufficient, the provider(s)' records of monitoring will be reviewed during monitoring visits. If the procedure is found to be insufficient, appropriate staff will work with the provider to improve their procedure. During time of procedure modification, appropriate division staff will provide monitoring of the IRT homes.
- G. Reports on each Provider review will be recorded in FACTS, consistent with the above framework. Reports will include the different areas that were reviewed and the provider's compliance with each area; evaluation of the data, identified trends, issues and problems, plans for improving services when indicated, and issues to be addressed in future reviews. Results will be reviewed with the DPBHS Quality Management and Utilization Review Committees.